

Outreach Committee Minutes
Friday, January 29, 2016
Hilton Lake Buena Vista – Kahili/Lilly Room
Orlando, FL
1:00pm – 3:00 pm ET

Attending: Andrei Iagaru, MD (Co-Chair); Henry F. VanBrocklin, PhD (Co-Chair); Alexandru Bageac, MD, MBA; Betsy de Parry; Vasken Dilsizian, MD; Giuseppe Esposito, MD; Phillip Koo, MD; Josh Mailman, MBA; Ashley Mishoe, PharmD; Neeta Pandit-Taskar, MD; James Timpe, MS, RT; Chadwick Wright, MD, PhD

Guests: Carina Aparici, MD; Robert Atcher, MD; Anca Avram, MD; Mark Tulchinsky, MD

Not Attending: Richard Benator, MD, FACR; Mehdi Djekidel, MD; Timothy Manzone, MD, JD, CCD; Jonathan McConathy, MD, PhD; Katherine Zukotynski, BSc, MD, FRCPC

SNMMI Staff: Saima Hedrick, Sukhjeet Ahuja, Julie Kauffman, Bonni Carney

1. **Introduction and Call to Order**, *Henry VanBrocklin, PhD*

a. Establish Quorum

Quorum was established.

b. Approve Minutes from 9/15/15

Minutes were approved with no changes.

c. Introductions

2. **Updates**

a. Brain Imaging Outreach Working Group

SNMMI has support from Lilly and GE, we are prioritizing amyloid outreach; over 18,000 patients are required for IDEAS study

We are planning roadshows at select institutions around the country; the first was at UPenn, it has been captured will be put online. Next roadshow is at University of Utah, then Wash U, UCSF/Stanford, and UAB.

There was a suggestion to reach referring physicians at national meetings such as APA. We have approved sessions for AAGP and APA, and are awaiting a decision from AAN.

It was noted that about 60% of attendees to the UPenn roadshow were not faculty. R. Atcher suggested holding sessions in major metropolitan areas for better attendance. A. Bageac suggested that non-university settings could bring a bigger presence in some regions. Saima stated that one goal was to get information to chapter meetings as well. A. Bageac suggested Bellevue, WA, or a location near UW, and working with a neurosciences institute such as the one in Portland as well as with local chapters to drive traffic.

H. VanBrocklin suggested that the Gladstone Institutes should be brought into planning of the UCSF event, and other similar organizations for a bigger base. R. Atcher suggested working with Banner Healthcare at the next Mid-Winter Meeting in Phoenix. G. Esposito stated that there has been discussion on chapters

organizing roadshows to get non-academic presence. S. Hedrick asked the committee to provide recommendations for non-academic organizations and P. Koo suggested that we engage neurology and geriatrics at their local chapter meetings. A. Bageac stated that the chapters are usually dominated by academics and reaching private centers/systems is important.

b. Targeted Radioisotope Therapy (TRT), Andrei Iagaru, MD

Dr. Iagaru stated that it had been a busy year with continuing education and successful sessions at NANETS, and SNMMI has been invited back for 2016;

The RSNA attendance was good, despite the Friday session at the end of the conference;

The group held ancillary sessions at ASCO GI, for NETs, and ASCO GU, for prostate cancer, and both were well-attended;

The expected approval of Lutathera will require significant outreach in 2016. The working group will meet at 3 PM to discuss their plans.

i. Draximage Video

The group reviewed the video on radioiodine therapy for thyroid cancer. Members of the group were concerned that this video is missing information that patients need.

Much of what is being said only presents the positives of undergoing the treatment and does not address precautions and risks. The group agreed that the animation was very informative and could be clipped out for use.

c. Patient Advocacy Advisory Board, Betsy de Parry

B. De Parry stated that Hill Day was very successful but wasn't sure how to measure the success. J. Mailman stated that what had been advocated for was signed off on, that Sue Bunning (SNMMI) also thought it had been very effective, and the patient presentations were very powerful. Betsy reported that the next Hill Day will be in June and the breakout sessions have been arranged, the to-do list and timeline were created and are progressing.

S. Hedrick informed the group that the breakout sessions will cover prostate cancer, neuroendocrine tumors, and breast cancer. She added that the completed TRT webinars are available online. The PRRT webinar had 97 attendees; the radioembolism webinar had 12 attendees but we may see more web traffic. Also, Spanish translation is in progress for some SNMMI websites through a contractor. Hits to both the webinars and the new factsheets can be tracked.

3. Appropriate Use Criteria (AUC), Sukhjeet Ahuja

a. Update

S. Ahuja stated that 2014 legislation requires referring physicians to consult AUC starting in 2017, but this timeframe was being pushed back. Based on the volume of procedures, four main areas were selected to complete first: bone scanning, VQ, HIDA and PET/CT for restaging SNMMI is following standards to develop the criteria. OHSU is the contractor reviewing the literature. Bone is furthest along, with expected publication in 3 months; 4 months for the second, 5-6 months for third, 7-8

months for the fourth. Systematic reviews are taking place for the other areas. PET/CT for restaging malignancy was severely restricted in scope and now includes recurrence of malignancy. Six topics were selected at the MWM for the next round of AUCs management of thyroid cancer, prostate cancer imaging, somatostatin receptor imaging, radium 223, GI transit imaging, and infection imaging. CMS gave direction on developing AUCs but not on the clinical delivery systems (CDS). Outreach for referring physicians is necessary.

CDS developer of ACRSelect, and Sage Analytics are being considered because the big equipment manufacturers will not go to the individual societies but will go to Sage, etc. It is not known if CMS will develop a system for approved evidence practice centers (EPC). For the literature review contract, SNMMI reached out to several companies to get cost and time estimates, but most did not have availability for 9-18 months and cost more than OHSU.

b. New Working Groups/Task Forces

P. Koo stated that ASCO is interested in working with SNMMI and wanted to sign an MOU – is AUC the right opportunity for this? Sukhjeet stated that we are already working with ASCO and have reps on bone scan and PET/CT as well as 12 other societies; this enables us to obtain their sanction on the final documents. He said that CMS proposed that organizations become approved provider lead entities (PLE) and SNMMI has applied for this, with notification coming in June. PLE enables automatic approval of documents created, with annual reviews required. H. VanBrocklin recommended that SNMMI leadership consider incorporating AUC-related education and outreach into the MOU with ASCO.

4. Chapter Outreach, Giuseppe Esposito, MD

G. Esposito stated the need for two-way interaction with the chapters and that they need to know what support we can give them. He will relay to them our support and report feedback to the committee. S. Hedrick stated that we need 5 months to plan outreach for the first 4 AUCs, then the next 6 months (for distribution and development of educational content).

A. Bageac questioned the importance of educating physicians when they will most likely rely on what is incorporated into their EMR systems – such as EPIC. S. Ahuja stated that SNMMI plans to use the CDS developers who reach out to EPIC. A. Bageac stated that there are different implementation models within Epic - the NDMC solution inserts itself into Epic, which makes it difficult to adjust.

S. Hedrick stated that the software for AUC is beyond the scope of Outreach. A. Igaru proposed the creation of a subcommittee for AUC outreach. H. VanBrocklin suggested there be four taskforces under the subcommittee. The group agreed that 4 task forces/working groups would be more appropriate for this work. M. Tulchinsky moved to create task forces who then report to the committee and the move was seconded. He offered to take up HIDA AUC outreach to referring physicians. C. Wright offered to handle PET/CT. It was suggested that Dr. Len Freidman lead the VQ task force, but no one had suggestions for bone metastasis. S. Hedrick offered to reach out to council presidents for interest and support. M. Tulchinsky suggested Dr. Christopher Polestro for GI. For future topics, the new groups will be repurposed; i.e., the bone scanning group could probably work on bone mets therapy; the HIDA group could work on the new GI transit AUC, etc. The committee will make these decisions when the time comes. The TRT working group has somostatin contacts who could be reached for the AUC outreach project.

5. Inreach, Saima Hedrick

The annual meeting proposal was approved; the Canadian Society submitted a similar proposal and we are working with them to develop a joint session. H. VanBrocklin stated that the Canadian society has a quarterly publication reaching 75k members and referring physicians and he thinks we can learn from them about their successful outreach; our outreach to patients is successful, we need to focus on referring physicians.

S. Hedrick stated that Terry Wilson suggested Sue Minerich of PETNET to speak as the industry representative in the session outreach; she has contacted her but has not heard back. She asked the group for suggestions for an alternate speaker and to please send them names via email.

Dr. Anca Avram (guest) started a discussion about the need to survey SNMMI membership to determine how many are doing therapy and what approach they are using, stating that this would be a stepping stone to create the AUC regarding iodine-131. Concerns were brought up about low survey response rates, how representative such surveys are, and whether it is an Outreach or membership issue. Continuing education module credits were mentioned as a way to encourage completing surveys. H. VanBrocklin stated that the survey should be a TCOE issue. M. Tulchinsky agreed to put together a proposal to send the TCOE leadership.

6. Website Updates

S. Hedrick stated that she would like review and approval of the website content, specifically for the referring physicians site. M. Tulchinsky suggested that Young Professionals group could handle this and S. Hedrick agreed to check with Ashley Mishoe. J. Mailman stated that SNMMI's Facebook page is lacking and could be a good tool; he suggested adding a social media requirement to this task.

7. Budget

a. Lily

b. GE

Lily and GE have given us support totaling \$250k for brain imaging outreach.

c. Genzyme

Genzyme has given support and we need a plan to move forward with thyroid issues. Dr. Avram suggested that we need published representatives like Dr. VanNostrand who can persuade people to step in. Dr. McDougal has already declined because of the controversy between the ATA and SNMMI guidelines.

S. Hedrick stated that we have support to do stand-alone sessions at endocrinology meetings; SNMMI could offer dinner and CE. Dr. Tulchinsky agreed to distribute invitations to join the group/committee so that a plan can be made. S. Hedrick will investigate the possibility of satellite meetings, or supported sessions.

d. AAA

AAA provided unrestricted support that was used for the ASCO GI ancillary session.

e. Blue Earth

Blue Earth provided unrestricted support for was used for the ASCO GU ancillary session and travel support for non-NM speakers on prostate cancer.

f. Unfunded Programs

i. Patient advocacy

Saima stated that we have funds for PAAB to come to the meetings, but not for food, reception, etc. She estimated \$10k necessary. J. Mailman will speak with companies that he is in contact with to see what can be done.

ii. AUC Outreach

8. Other Business

H. VanBrocklin shared feedback from the Committee on Chapters meeting – many were unable to find the link to request speakers. S. Hedrick will send an email to the Chapter Presidents and Administrators with the link. The group recommended that S. Hedrick work with J. Spahr to make this possible.

9. Adjournment

A Doodle poll will be sent to the group for the next call in March 2016.

Action Items

- Members of the group will complete the Doodle Poll for a BIO meeting at the SNMMI Annual Meeting. We will secure a conference phone so this poll also applies to those who can join us via phone. <http://doodle.com/poll/zncuumk6e3mfviuy>
- J. Dubroff will confirm the need for hotel rooms at ASNR for Dr. Nasrullah
- S. Hedrick will move ahead with the UCSF event at the beginning of July
- S. Hedrick will share the questions to use for the enduring recordings from UPenn
- S. Hedrick will send an email to the speakers from ASNR notifying them of the travel reimbursement policy
- S. Hedrick will request information from the IDEAS Communications Committee about the % of psychiatrists in the approval process, or approved for the study, along with an update on the recruitment status overall.
- Dr. Esposito will relay to the chapters our support and report feedback to the committee.
- Dr. Tulchinsky offered to take up HIDA AUC outreach to referring physicians.
- Dr. Wright offered to handle the PET/CD.
- S. Hedrick offered to reach out to council presidents for interest and support.
- Dr. Tulchinsky agreed to put together a survey proposal for physicians.
- S. Hedrick offered to check with Ashley Mishoe regarding review and approval of the website content, specifically for the referring physicians site.